

Retail Food Inspection Report


Floyd County Health Department
Telephone (812) 948-4726

| | | | |
|--|--|--|-------------------------------|
| Establishment Name SMOOTHIE KING | Telephone Number Est (812) 945-5464 Own 502-819-9700/ 502-819-4 | Date of Inspection 09/02/2020 | ID# |
| Address 4214 CHARLESTOWN ROAD SUITE #1, NEW ALBANY | | | |
| Owner BOB & DEBBIE MCILVOY | Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) | Follow Up | Released 09/12/2020 |
| Owner's Address 1210 WATER WORKS PLACE NEW ALBANY, IN 47150- | | Menu Type 1 _ 2 <u>X</u> 3 _ 4 _ 5 _ | |
| Person in Charge DEBBIE MCILVOY | | | |
| Responsible Person's Email | | | |
| Certified Food Handler DEBBIE MCILVOY | | | |

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

| Section # | C | NC | R | Narrative | To Be Corrected |
|-----------|---|----|---|-----------|-----------------|
| | | | | | |

Summary of Violations C NC R

| | |
|---|--|
| Received by (name and title printed): DEBBIE MCILVOY | Inspected by (name and title printed): A.J. Ingram CHIEF FOOD SPECIALIST |
| Received by (signature): | Inspected by (signature):  |
| cc: | cc: |